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SEP 01 2006**

**To:** Commissioner for Patents**From:** Steven L. Nichols**Fax:** (571) 273-8300**Pages:** 21 pages including coversheet**Phone:****Date:** September 1, 2006**Re:** Application No. - 10/057,116

☒ **Urgent**   ☒ **For Review**   ☐ **Please Comment**   ☐ **Please Reply**   ☐ **Please Recycle**

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**Transmitted, herewith, are the following documents:**

1. Facsimile Coversheet (1 page)
2. Certificate of Transmission (1 page)
3. Transmittal Letter for Response/Amendment with Duplicate Copy (2 pages)
4. Amendment (17 pages)

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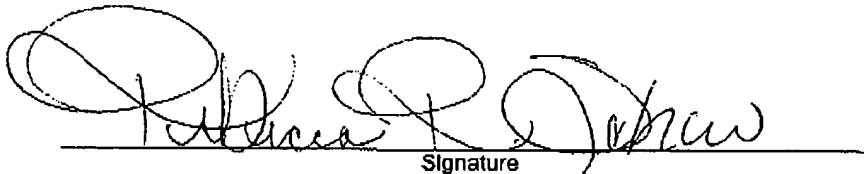
Application No.: 10/057,116

Attorney Docket No.: AB-165U

### Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents via the USPTO central facsimile number, (571) 273-8300.

on September 1, 2006  
Date



Signature

Rebecca R. Schow

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AB-165U

Serial No.: 10/057,116

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re Patent Application: Todd K. Whitehurst et al.

Confirmation No.: 1864

Application No.: 10/057,116

Examiner: SCHAEZLE, Kennedy

Filed: January 24, 2002

Group Art Unit: 3766

Title: "Fully Implantable Neurostimulator for Peripheral  
Nerve Stimulation as a Therapy for Chronic Pain"**SEP 01 2006**Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is/are the following in the above-identified application:

- (X) Response/Amendment ( ) Petition to extend time to respond  
 ( ) New fee as calculated below ( ) Supplemental Declaration  
 (X) No additional fee ( ) Other: \_\_\_\_\_

CLAIMS AS AMENDED BY A LARGE ENTITY						
FOR	CLAIMS REMAINING AFTER AMENDMENT	NUMBER EXTRA	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	8	MINUS	26	= 0	X \$50.00	\$0.00
INDEP. CLAIMS	4	MINUS	4	= 0	X \$200.00	\$0.00
[ ] FIRST PRESENTATION OF A MULTIPLE DEPENDANT CLAIM					+ \$360.00	\$
EXTENSION FEE	[ ] 1ST MONTH \$120.00	[ ] 2ND MONTH \$450.00	[ ] 3RD MONTH \$1020.00	[ ] 4TH MONTH \$1590.00		\$0.00
OTHER FEES						\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00

Please charge \$0.00 to Deposit Account 18-0013/40328-0030. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 18-0013/40328-0030 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 18-0013/40328-0030 under 37 CFR 1.16, 1.17, 1.19, 1.20 and 1.21. A duplicate of this sheet is enclosed.

I hereby certify that this correspondence is being transmitted to the US Patent and Trademark Office via facsimile number (571) 273-8300 on September 1, 2006

Number of pages transmitted: 21

Signature: 

Rebecca R. Schow

Respectfully submitted,

By: 

Steven L. Nichols (Reg. No.: 40,326)  
 Attorney/Agent for Applicant(s)  
 Telephone No.: (801) 572-8066  
 Date: September 1, 2006

AB-165U

DUPLICATE

Serial No.: 10/057,116

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Todd K. Whitehurst et al.

Application No. 10/057,116

Filed: January 24, 2002

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Peripheral Nerve Stimulation as a  
Therapy for Chronic Pain

Group Art Unit: 3766

Examiner: SCHAETZLE, Kennedy

AFTER-FINAL AMENDMENT  
UNDER 37 C.F.R. § 1.116

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Commissioner:

In response to the final Office Action mailed July 14, 2006, please consider the following.